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FEE TRANSMITTAL



Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$ 910.00)

Complete If Known

| | |
|----------------------|------------------|
| Application Number | 10/607,167 |
| Filing Date | 27 June 2003 |
| First Named Inventor | HYONG-KYUN LEE |
| Examiner Name | ANYA, CHARLES E. |
| Group/Art Unit | 2194 |

Attorney Docket No. P56833

METHOD OF PAYMENT (check one)

FEE CALCULATION

1. ■ Payment Enclosed:

(CHECK #53011)

Check Credit Card Money Order
 Other

 Charge Any Additional Fee Required Under 37 C.F.R. §1.16 and 1.17. Applicant claims small entity status. See 37 CFR 1.27

2. ■ The Commissioner is hereby authorized to charge any deficiency and credit any over payments to:

Deposit Account Number: 02-4943

FEE CALCULATION

| Fee Code (\$) | Fee Code (\$) | Fee Description | Fee Paid |
|------------------------|---------------|---|-----------|
| EXTENSION OF TIME FEES | | | |
| 1251 120 | 2251 60 | Extension for reply within first month | \$ 120.00 |
| 1252 450 | 2252 225 | Extension for reply within second month | \$ |
| 1253 1020 | 2253 510 | Extension for reply within third month | \$ |
| 1254 1590 | 2254 795 | Extension for reply within fourth month | \$ |
| 1255 2160 | 2255 1080 | Extension for reply within fifth month | \$ |
| APPEAL | | | |
| 1401 500 | 2401 250 | Notice of Appeal | \$ |
| 1402 500 | 2402 250 | Filing a brief in support of an appeal | \$ |
| 1403 1000 | 2403 500 | Request for oral hearing | \$ |
| CLAIMS | | | |
| 1201 200 | 2201 100 | Independent claims in excess of 3 | \$ |
| 1202 50 | 2202 25 | claims in excess of 20 | \$ |
| OTHER FEES | | | |
| Other Fee (specify) | \$ | Other Fee (specify) | \$ |
| Other Fee (specify) | \$ | Other Fee (specify) | \$ |
| Other Fee (specify) | \$ | Other Fee (specify) | \$ |

SUBTOTAL: LEFT COLUMN \$ 120.00

SUBTOTAL: RIGHT COLUMN \$ 790.00

SUBMITTED BY

Complete (if applicable)

Typed or Printed Name

Robert E. Bushnell, Esq.

Reg. Number

27,774

Signature

Date

4 September 2007

Deposit Account

User ID

REB/nm

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.